

# CITY OF DUNWOODY BUSINESS REGISTRATION APPLICATION

Finance & Administration, P.O. Box 888074 Dunwoody, GA. 30356 (678) 382-6700 Fax (678) 382-6701 ACCOUNT # \_\_\_\_\_

1	<b>OFFICE USE ONLY:</b> NAICS _____ Class _____ Type _____ H.O.P. _____ District _____ Lot _____ Block _____ Parcel _____		
2	<b>Zoning:</b> Approved by _____ Denied by _____ Date _____ Denial Reason _____		
3	<b>Pending Items:</b> C.O. _____ Fire _____ Health _____ Sanitation Service _____ State License _____ Insurance (Taxi/Limos) _____ Police _____ Other _____		
	<b>Business License Items:</b> Primary ID# _____ Owner's ID# _____ Bill To ID# _____		
4	Type or Line(s) of Business to be conducted: _____		
5	Business /Trade Name _____ Street Address: _____ City/State/Zip _____ Business Telephone # _____ E-Mail : _____ Bill To/Mailing Name: _____ Bill To /Mailing Address: _____ City/State/Zip: _____	Applicant's Name _____ Title: _____	
6		<b>Ownership Type:</b> Single Owner/Sole Proprietor _____ Partnership _____	
7		Owner(s) Name: _____	
8		<b>Ownership Type:</b> Association _____ Corporation _____ LLC _____	
9		Corporate or LLC Name: _____	
10		State Where Incorporated: _____ Date Inc: _____	
11		Agent's Name: _____ Title: _____	
12		Owner/Agent's Home Address: _____	
13		Owner/Agent's City/State/Zip: _____	
		Owner/Agent's Telephone (Home No.): _____	
13	<b>Applicant's must provide copies of driver's license or other Governmental Issued Photographic Identification with Application</b>		
14	Will business be based out of your home? Yes _____ No _____. If yes, is a "Home Occupation Supplemental Registration Form" included? Yes _____ No _____		
15	Will your business be an adult entertainment establishment (sexually oriented business) as defined by the Dunwoody City Code or does (will) it offer any form of adult entertainment? Yes _____ No _____		
16	Has the owner, applicant, the stated business, or any legally or organizationally related entity had a business occupation tax certificate denied, suspended, or revoked within the past twelve (12) months? Yes _____ No _____. If yes, attach written explanation.		
17	<b>Georgia Open Records Act prohibits public viewing of gross receipts &amp; number of employees. The public may view other information on this form.</b>		
18	Dunwoody plus Georgia Gross Receipts (estimate)	\$ _____ X _____	\$ _____
19	Employee Fee (at least one, includes owner/operator)	# _____ X _____	\$ _____
20	Flat Fee of \$50.00. (except for professionals paying optional \$400)		<u>\$50.00</u>
21	Administrative Fee (no refund or transfer)		<u>\$75.00</u>
22	<b>Total Amount Due or Professional Option.</b> (\$400 per practitioner by O.C.G.A.)		\$ _____
23	This application must be executed under oath and notarized. I, _____, do solemnly swear that the information on this application is true, and that no false or misleading statement is made herein to obtain a business occupation tax certificate. I understand that if I provide false or misleading information in this application I may be subject to criminal prosecution and/or immediate revocation of my business occupation tax certificate issued as a result of this application. I understand that I must comply with all county ordinances and regulations. I hereby agree to provide clearance(s) and/or inspection report(s) required prior to issuance of a business occupation tax certificate. All tax certificates expires December 31 and must be renewed annually		
24	Signature _____ Position _____ Date _____		
25	Sworn to and subscribed before me this _____ day of _____, 20 _____.		
26	Notary Public Signature _____		